

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Docket Number (Optional)</b> BAYER-0015-A								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of RIEDL et al.</td> </tr> <tr> <td style="width: 60%; padding: 2px;">Application Number 09/889,227</td> <td style="padding: 2px;">Filed January 8, 2002</td> </tr> <tr> <td colspan="2" style="padding: 2px;">w-CARBOXY ARYL SUBSTITUTED DIPHENYL UREASAS For RAF KINAS INHIBITORS</td> </tr> <tr> <td style="width: 40%; padding: 2px;">Group Art Unit 1625</td> <td style="padding: 2px;">Examiner DESAI, Rita J.</td> </tr> </table>			In re Application of RIEDL et al.		Application Number 09/889,227	Filed January 8, 2002	w-CARBOXY ARYL SUBSTITUTED DIPHENYL UREASAS For RAF KINAS INHIBITORS		Group Art Unit 1625	Examiner DESAI, Rita J.
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <p> <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) \$ _____  <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) \$ _____  <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <u>\$1020.00</u>  <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) \$ _____  <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) \$ _____         </p> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.  <input type="checkbox"/> A check in the amount of the fee is enclosed.  <input checked="" type="checkbox"/> Payment by credit card via EFS.  <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>.         </p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71              Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  <input checked="" type="checkbox"/> attorney or agent of record.  <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).              Registration number if acting under 37 CFR 1.34(a) _____ .         </p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p style="text-align: center;">July 23, 2007</p> <p style="text-align: center;">_____ Date</p> </div> <div style="width: 45%;"> <p style="text-align: center;">/Richard J. Traverso/</p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;">Richard J. Traverso, Reg. No. 30,595</p> <p style="text-align: center;">_____ Typed or printed name</p> </div> </div> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> *Total of 2 forms are submitted.</p>										